

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	D B	7020	9/20/84
O.I.P.E. CLASSIFIER			9/20
FORMALITY REVIEW	RJ	66959	9/9-26
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
1	✓ 9/20/84
2	✓
3	✓
4	✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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